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RUEHLM RUEHLZ RUEHPOD RUEHROV RUEHSR RUEHVK RUEHYG  
DE RUEHSL #0621/01 3241421  
ZNR UUUUU ZZH  
O 201421Z NOV 07  
FM AMEMBASSY BRATISLAVA  
TO RUEHC/SECSTATE WASHDC IMMEDIATE 1332  
INFO RUEHZN/EUROPEAN POLITICAL COLLECTIVE  
RUEABND/DEA WASHDC

UNCLAS SECTION 01 OF 03 BRATISLAVA 000621

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INR FOR JOHN LYLE

E.O. 12958: N/A

TAGS: SNAR LO

SUBJECT: SLOVAKIA: 2007-2008 INCSR PART I

REF: STATE 136780

¶1. Post's submission for the 2007-2008 International Narcotics Control Strategy Report (INCSR) Part I, Drugs and Chemical Control, follows in paragraph 2. This report contains actual statistics as of January 1, 2007. If newer information is available in time, an updated submission will be sent before February 1, 2008. POC for the INCSR in Slovakia is Aaron Chase, Fascell Fellow. Telephone number is 421 2 5922 3376, email is ChaseAU@state.gov

¶2.

#### II. Summary

Slovakia lies near the western end of the historic Balkan drug transit route, which runs from southwest Asia to Turkey and on to other western European countries. Slovak Police reported no significant developments in the field of narcotics control or use in calendar year 2007. All forms of narcotics remain available in Slovakia and interest in synthetic drugs, particularly in pervitin (MDMA) continues to rise. During calendar year 2006 Slovakia saw a rise in interdictions of a new synthetic stimulant narcotic, mCPP. Slovakia is a party to the 1988 UN Drug Convention.

#### II. Status of Country

Interest in synthetic drugs, especially pervitin and Ecstasy, has driven an increase in local illicit drug processing and production, as well as in the trade of precursors including ephedrine and pharmaceuticals from which ephedrine can be extracted. Slovak Police attribute the rising interest in synthetic drugs to their low price, accessibility and the greater effect they provide in comparison to more traditional stimulants such as cocaine.

Cannabis is the most commonly abused narcotic in Slovakia. Local cannabis production is on the increase, especially hydroponically grown cannabis with sharply increased THC content. Police believe consumer interest in hydroponically grown cannabis, attributable to experience with higher-THC varieties imported from Western Europe, has driven growth in this sector. Marijuana cultivation in Slovakia remains predominantly the preserve of local actors who serve the local market.

Officials believe the market for heroin and cocaine is saturated, and prices for these drugs are decreasing even as consumer demand continues to rise. Heroin is mostly imported from Balkan countries by organized groups of ethnic-Albanian criminals, working in concert with ethnic-Turkish groups that transport the narcotics from the place of production. The same ethnic-Albanian groups largely control the trade in cocaine, which is usually of South American or Caribbean origin. Police suspect increasing imports of African cocaine are reaching the Slovak market.

For all drugs, regional differentiation in consumption continue to diminish. Narcotics use is spread over the whole territory of the Slovak Republic.

### III. Country Actions Against Drugs

Policy Initiatives. In 2005 the "National Program for the Fight against Drugs 2004-2008" was developed into Action Plans for specific ministries and regional authorities in accordance with the "Action Plan of the EU for the Fight Against Drugs." At the same time, the Slovak Republic Government Office issued an instruction setting out the activities of regional authorities in the field of narcotics, and unifying procedures for establishing regional coordination commissions for narcotics issues. A new Penal Code and Code on Criminal Procedure became effective on January 1, 2006. The most important change contained in the new Penal Code concerns criminal liability for the possession of drugs for personal consumption. Specifically, Sections 171 and 135 of the new Penal Code set out maximum sentences of three years incarceration for possession of up to three doses of any narcotic substance, and up to five years for possession of 4-10 doses. Possession of more than 10 doses is considered possession for other than personal consumption and is punishable by 10-15 years imprisonment.

Law Enforcement Efforts. The National Anti-Narcotics Unit of the Police Presidium employs 30 people to cover the Bratislava (capital) region. Responsibility for anti-narcotics programs outside the capital belongs to the Office for the Fight Against Organized Crime, which includes three distinct offices for Western, Central and Eastern Slovakia. The National Anti-Narcotics Unit includes three sections: the Street-sales Section, the Section for Major Cases (including all trans-national cases) and the Joint Police-Customs Section. In 2006, 1,952 drug-related criminal

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cases were brought to court in Slovakia, an increase of almost 20% over 2005. In 2006, the Police seized: 2,434.17 g of heroin, 81.63 kg of marijuana (herbs), 614.48 kg of marijuana (wet), 961.83 g of cocaine, and 8,477 tablets of pervitin (MDMA).

Corruption. As Slovakia has received more investments from abroad and the post-Socialist rule of law has matured, incidences of corruption have fallen. Nevertheless, corruption remains a concern in both the public and private spheres. As a matter of policy and by all accounts in practice, the Government of Slovakia does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions.

Agreements and Treaties. Slovakia is a party to the 1988 UN Drug Convention; the 1961 UN Single Convention on Narcotic Drugs, as amended by the 1972 Protocol; the 1971 UN Convention on Psychotropic Substances; and the UN Convention against Transnational Organized Crime and its three protocols. Slovakia ratified the 2003 UN Corruption Convention on June 1, 2006.

In conjunction with Slovakia's accession to the European Union in 2004, Slovakia implemented the following acts of the European institutions in national legislation:

- ¶1. Council Framework Decision 2004/757/JAI of 25 October 2004 laying down minimum provisions on the constituent elements of criminal acts and penalties in the field of illicit drug trafficking;
- ¶2. Regulation (EC) No 273/2004 of the European Parliament and of the Council of 11 February 2004 on drug precursors;
- ¶3. Council Regulation (EEC) No 111/2005 of 22 December 2004 laying down rules for the monitoring of trade in drug precursors between the Community and third countries;
- ¶4. Commission Regulation (EC) No 1277/2005 of 27 July 2005 laying down implementing rules for Regulation (EC) No 273/2004 of the European Parliament and of the Council on

drug precursors and for Council Regulation (EC) No 111/2005 laying down rules for the monitoring of trade between the Community and third countries in drug precursors

15. Council Decision 2005/387/JHA of 10 May 2005 on the information exchange, risk-assessment and control of new psychoactive substances

16. 2001/419/JHA: Council Decision of 28 May 2001 on the transmission of samples of controlled substances

Cultivation/Production. Marijuana is the most commonly cultivated illicit drug in Slovakia due to strong demand and a suitable climate. Hydroponic (laboratory) cultivation of marijuana has become more popular recently in response to consumer demand for a product with a higher THC content. The majority of marijuana is grown in family homes or rented agricultural buildings. The continuing increase in marijuana use is attributed to ease of access, low prices, and the persistent belief that it is not a harmful narcotic.

The number of small semi-portable drug laboratories used to produce pervitin and other synthetic drugs continues to rise. Police believe that Slovakia's domestic market for synthetic drugs is served exclusively by domestic production, which benefits from low costs of inputs and relative ease of production. The greatest challenge in pervitin production is acquiring the precursor ephedrine. Police have discovered cooperative arrangements among organized groups of criminals that import pervitin precursors when supplies are scarce and re-export ephedrine-containing medicines from Slovakia when supplies are readily available.

Drug flow/Transit. Foreign criminal groups with local contacts, especially ethnic-Albanian and Turkish groups, are thought to be responsible for most transshipments. Drugs, including heroin from Central Asia, cocaine from South America and hashish from Morocco pass through Slovakia on the final leg of the so-called Balkan drug transit route. Ethnic Albanian groups dominate the heroin trade, though ethnic Roma groups are thought to share in street-level sales. Due to the high price of imported drugs, it is believed that only relatively small quantities of transit drugs remain in Slovakia for domestic consumption. In 2005 sales of heroin to Slovak consumers stagnated. This is thought to be a consequence of cheaper and more readily available synthetic drugs from local suppliers.

Domestic Programs (Demand Reduction). The National Program for the Fight against Drugs (NPFD) 2004-2008 is primarily directed at activities to reduce drug demand. The National Strategy also defines key ministries for the implementation of prevention, including the Ministry of Education, Ministry

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of Health and Ministry of Labor, Social Affairs and Family. Drug-use prevention is an integral part of the education process at schools. Positions for Drug Prevention Coordinators have been created at many schools, and Pedagogical and Psychological Counseling Centers have been established in each district. Since 2006, these centers have included programs that focus preventing social pathologies related to drug use, training courses for peer activists, teacher training, and methodological assistance to school psychologists and educational counselors.

2006 saw a decrease in the number of drug users in treatment in Slovakia. 1,927 drug users including 13 foreigners were treated in 2006; this figure includes patients treated in general medical facilities. These were mostly users of heroin, pervitin and marijuana. A study conducted by the National Monitoring Center for Drugs estimates the number of problem drug users, defined as users of injected drugs, and long-term regular opiate and/or pervitin users, at between 18,900 and 34,500 (approximately 4.89 per 1000 inhabitants). Experience with pervitin use remains relatively limited although trends are upward in comparison with earlier surveys. The lifetime prevalence of pervitin use in

Slovakia's population increased from 0.6 percent (2002) to 1.5 percent (2004) and decreased in 2006 (1.2%).

In 2006 the most commonly sought treatment was for opiates (42 percent), followed by pervitin (22.6 percent). Among patients seeking treatment for the first-time, however, stimulants (pervitin) were the most common concern, followed by opiates.

From 2000 to 2006, lifetime prevalence of marijuana use in Slovakia's population (15-64 years) increased from 11.7 percent to 16.1 percent. Cocaine is used only rarely in Slovakia and is believed to be used recreationally by a small group of people. In 2006, 20 cocaine users were in treatment. In 2006, treatment was provided by 6 specialized treatment centers for drug dependency, departments of psychiatric hospitals and facilities, and by offices of psychiatrists specialized in drug addiction treatment. Social reintegration and residential care for clients having received medical treatment were provided by 18 accredited social reintegration centers.

The National Monitoring Centre for Drugs is concerned by insufficient coverage of needle and syringe exchange programs. In 2006, such services were provided by 7 organizations in 10 cities. The challenge is to maintain the long-term sustainability of these programs in the face of financial instability, shortage of personnel, and lack of client interest. A substitution treatment register still does not exist in Slovakia. From 1997 to 2005, methadone maintenance was available only in the capital, Bratislava. In 2006, three new substitution programs were created, two methadone maintenance programs in Bratislava and Banska Bystrica (Central Slovakia) and one buprenorphine (Subutex) program in Kosice (Eastern Slovakia).

#### IV. U.S. Policy Initiatives and Programs

**Policy Initiatives.** The Regional DEA Office in Vienna shares information with the Slovak Police Presidium on operational issues of mutual interest, and has offered training for Slovak counterparts in the past.

**The Road Ahead.** The U.S. will continue to work with the Government of Slovakia to fight drug transit through Slovakia and to assist with drug treatment in Slovakia itself.

SILVERMAN